

PEER-REVIEW REPORT

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Title: Clinical features and literature review related to the material differences in thread rhinoplasty: Two case reports

Reviewer's code: 00505494

Position: Peer Reviewer

Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: Italy

Author's Country/Territory: South Korea

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Reviewer chosen by: Jin-Lei Wang

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Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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SPECIFIC COMMENTS TO AUTHORS

The case report is globally well written. Obviously there is no chance to draw any conclusion due to the paucity of the subjects, but it sufficiently focused on some issues regarding a very specialistic non-invasive procedure and so it may generate interest. In my opinion, some aspects of patient 1 and 2 history should be better specified: had the patient 1 a postoperative complete wound healing and a disease-free period? Had the patient 2 ever noticed any alteration of the tip of the nose before the abscess formation (like a palpable nodule under the skin surface)? In the Conclusion section it is suggested that PDO thread may cause a severe inflammatory reaction (differently from a non-absorbable one), but how can be compared a patient with an early infection complication with another with a late one? It would be advisable to limit the comments to the facts, maybe proposing some hypothesis but without drawing any conclusion. It would also be more useful a retrospective case series study to compare the late outcome and complications. I suggest to accept the paper after a minor revision.